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# **GUIDANCE DOCUMENT**

## **Non-prescription Oral Adult Antitussive Cough and Cold Labelling Standard**

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Minister of Health

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**Health Products and Food Branch**

**Canada**

<p>Our mission is to help the people of Canada maintain and improve their health.</p> <p style="text-align: right;"><i>Health Canada</i></p>	<p>The Health Products and Food Branch's mandate is to take an integrated approach to the management of the risks and benefits to health related products and food by:</p> <ul style="list-style-type: none"> <li>• minimizing health risk factors to Canadians while maximizing the safety provided by the regulatory system for health products and food; and,</li> <li>• promoting conditions that enable Canadians to make healthy choices and providing information so that they can make informed decisions about their health.</li> </ul> <p style="text-align: right;"><i>Health Products and Food Branch</i></p>
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***Également disponible en français sous le titre :*** Ligne directrice : Norme d'étiquetage des médicaments pour adultes vendus sans ordonnance contre la toux et le rhume administrés par voie orale

## FOREWORD

Guidance documents are meant to provide assistance to industry and health care professionals on **how** to comply with governing statutes and regulations. They also provide assistance to staff on how Health Canada mandates and objectives should be implemented in a manner that is fair, consistent and effective.

Guidance documents are administrative instruments not having force of law and, as such, allow for flexibility in approach. Alternate approaches to the principles and practices described in this document **may be** acceptable provided they are supported by adequate justification. Such approaches should be discussed in advance with the relevant program area to avoid the possible finding that applicable statutory or regulatory requirements have not been met.

As a corollary to the above, it is equally important to note that Health Canada reserves the right to request information or material, or define conditions not specifically described in this document, in order to allow the Department to adequately assess the safety, efficacy or quality of a therapeutic product. Health Canada is committed to ensuring that such requests are justifiable and that decisions are clearly documented.

This document should be read in conjunction with the accompanying notice and the relevant sections of other applicable guidance documents and regulations.

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## 1. INTRODUCTION

This labelling standard describes the requirements necessary to receive market authorization (a Drug Identification Number (DIN)) for non-prescription oral antitussive products containing dextromethorphan or dextromethorphan hydrobromide as a single ingredient for use in adults and children 12 years of age and older to relieve symptoms of the common cold. This labelling standard does not apply to products for use by children under 12 years of age.

## 2. MEDICINAL INGREDIENT

**TABLE 1: Drug medicinal ingredient**

Therapeutic Class	Medicinal Ingredient Preferred Name
Antitussive	Dextromethorphan
	Dextromethorphan hydrobromide

## 3. PHARMACEUTICAL FORMS

### 3.1 Acceptable:

- Immediate release solid oral dosage forms, such as tablets, caplets, capsules, chewable tablets, effervescent tablets, powders, or lozenges.
- Oral liquid formulations, such as suspension, syrup, or elixir.

### 3.2 Unacceptable:

- Modified dose release (e.g. liquid extended release, solid oral sustained release, bi-layer formulations or enteric coated products).
- Products that require evaluation of animal sourced ingredients (e.g. animal tissue based gelatin capsules, where a valid European Directorate for the Quality of Medicines (EDQM) Certificate of Suitability or equivalent is not provided).
- Other dosage forms (e.g. chewable liquid filled capsule, powder dosage form intended for direct application to the mouth, thin strips, lollipops, popsicles/freezer pops, etc.).

## 4. USES

### 4.1 Acceptable Uses

#### Antitussive / cough suppressant

#### Temporary relief of dry cough due to:

- minor bronchial irritation occurring with a cold / common cold / inhaled irritants;
- minor throat and bronchial irritation occurring with a cold / common cold / inhaled irritants; or
- cold / common cold / inhaled irritants.

## 4.2 Unacceptable Uses

The following indications for antitussive products are excluded and would require a review outside of this labelling standard. These include, but are not limited to, the treatment of:

- lower respiratory tract conditions (including infections and asthma);
- bronchitis;
- persistent or chronic cough due to smoking, emphysema or asthma;
- coughs due to allergies;
- influenza/flu;
- allergy/hay fever symptoms; or
- relief of wet cough.

## 5. DOSAGE DIRECTIONS

### 5.1 Dosage for Adults and children 12 years of age and older<sup>1</sup>

**TABLE 2:**

Therapeutic Class	Medicinal ingredient preferred name	Recommended Single Dose <sup>2</sup>	Dose Interval	Maximum Daily Dose
Antitussive	Dextromethorphan OR Dextromethorphan hydrobromide	10-20 mg	every 4 hours	120 mg
		30 mg	every 6-8 hours	

**Do not** take more than 120 mg of dextromethorphan in 24 hours.

### 5.2 Dosing Considerations

1. The quantitative declaration of the medicinal ingredients on any panel of the inner and outer labels should be prominently displayed and should be further identified by the therapeutic class or indication listed under **Section 4.1**, e.g.: “Medicinal Ingredient: Dextromethorphan (antitussive) 10mg”; “Medicinal Ingredient: Dextromethorphan (relief of dry cough) 10mg”.
2. The labels should declare the recommended single and maximum daily dose, as well as the dosing interval for the product. Maximum daily dose may be expressed as: do not take more than 120 mg (or X tablets/mL/doses) per day).
3. For liquid formulations, if a measuring device is provided, the following statement should be included with the directions for use: “Use only the measuring device provided.”

<sup>1</sup> Doses and dosing frequency are those recommended by the Expert Advisory Committee on Nonprescription Cough and Cold Remedies (Second Report, April 1989).

<sup>2</sup> For liquid formulations, the single dose must be contained and labelled in standard units (e.g. millilitres).

### 5.3 Combinations

Applicants should apply outside of the labelling standard if they wish to combine dextromethorphan or dextromethorphan hydrobromide with other medicinal ingredients.

## 6. WARNINGS

### For outer and inner label

- **Do not use** with a monoamine oxidase inhibitor (MAOI) (drugs for depression or Parkinson's disease) or for two (2) weeks after stopping the MAOI drug.
- **Do not use** with other drugs containing dextromethorphan.

### Ask a doctor before use if you:

- have a persistent cough such as occurs with smoking, asthma or emphysema;
- have a cough with excessive phlegm (mucus);
- have difficulty breathing or other chronic lung conditions; or
- are pregnant or breastfeeding.

The first three (3) could be signs of serious condition.

### Ask a doctor or pharmacist before use if you:

- are allergic to dextromethorphan or any other ingredient in this product

### Stop use and ask a doctor if:

- symptoms worsen or last for more than one (1) week; or
  - fever, rash, or persistent headaches develop.
- **In Case of Overdose:** Call a Poison Control Centre or a healthcare professional immediately, even if you do not notice any signs or symptoms.

**7. PRODUCT FACTS TABLE: RECOMMENDED (NOT MANDATORY)<sup>3</sup>**

<b>Product Facts</b>	
<b>Medicinal ingredient (in each dosage unit)</b>	<b>Purpose</b>
Dextromethorphan XX mg.....	Antitussive / cough suppressant
<b>Uses</b> <b>Temporary relief of dry cough due to:</b>	• • •
<b>Warnings</b> <b>Do not use</b>	
<ul style="list-style-type: none"> <li>with a monoamine oxidase inhibitor (MAOI) (drugs for depression or Parkinson’s disease) or for 2 weeks after stopping the MAOI drug.</li> <li>with other drugs containing dextromethorphan.</li> </ul>	
<b>Ask a doctor before use if you:</b>	
<ul style="list-style-type: none"> <li>have a persistent cough such as occurs with smoking, asthma or emphysema;</li> <li>have a cough with excessive phlegm (mucus);</li> <li>have difficulty breathing or other chronic lung conditions; or</li> <li>are pregnant or breastfeeding.</li> </ul>	
<b>The first three (3) could be signs of serious condition.</b>	
<b>Ask a doctor or pharmacist before use</b> if you are allergic to dextromethorphan or any other ingredient in this product.	
<b>Stop use and ask a doctor if:</b>	
<ul style="list-style-type: none"> <li>symptoms worsen or last for more than 1 week; or</li> <li>fever, rash, or persistent headaches develop.</li> </ul>	
<b>Directions</b>	
<b>Adults and children 12 years and over:</b>	
<ul style="list-style-type: none"> <li>take XX (tablet/mL) every XX hours</li> <li>do not take more than 120 mg in 24 hours</li> </ul>	
<b>Overdose warning:</b> In case of overdose, call a Poison Control Centre or a healthcare professional immediately, even if you do not notice any signs or symptoms.	
<b>Other Information:</b>	
•	
<b>Non-medicinal ingredients:</b> < List all NMIs >	
<b>Questions? Concerns?</b>	

<sup>3</sup> The regulatory amendment for a Fact Table for non-prescription drug products would come into force three (3) years after the day of registration in *Canada Gazette Part II*.  
<http://gazette.gc.ca/rp-pr/p2/2014/2014-07-02/html/sor-dors158-eng.php>



## 8. OTHER LABELLING REQUIREMENTS

### Declaration of ingredients for all products:

Section C.01.004 of the *Food and Drug Regulations* indicates that for single-ingredient products and/or products for which a compendial standard exists, the following must be shown on the inner and outer labels:

- the proper name on the principal display panel immediately preceding or following the brand name in a font size not less than 1/2 the size of the brand name;
- a quantitative list of the medicinal ingredients by their proper names, or common names if they have no proper names; and
- a qualitative list of non-medicinal ingredients clearly distinguished from the medicinal ingredients.

Health Canada's Guidance Document: Labelling of Pharmaceutical Drugs for Human Use should be consulted for applicable labelling requirements.

### Legibility:

Although no specific type size is mentioned in the *Food and Drug Regulations*, Section A.01.016 specifies that all information required to appear on a label must be:

- clearly and prominently displayed; and
- readily discernible to the purchaser or consumer under the customary conditions of purchase and use.

A person with normal vision, or those with corrective glasses that restore normal vision, should be able to read the information without straining. The colour, contrast, position, and spacing of the information are all to be taken into consideration in complying with these requirements.

## 9. SPECIFICATIONS

This labelling standard describes those requirements that are specific to this class of drug.

- Products must comply with the requirements in the *Food and Drugs Act* and associated *Regulations*. It is also noted that all products are subject to Part C, Division 2 of the *Food and Drug Regulations*.
- All ingredient (medicinal and non-medicinal) and finished product specifications must meet or exceed the standards described in the publications referred to in Schedule B of the *Food and Drugs Act*, or equivalent standards.

- Where no Schedule B monograph exists for the finished product's dosage form, specifications should be similar to those of a comparable compendial dosage form demonstrating the product's identity, potency, purity and quality.
- Finished product specifications should include tests for identification and an assay with suitable limits for the medicinal ingredient(s). The specifications for all dosage forms should include a description of the dosage form, including organoleptic properties, as well as physico-chemical testing (e.g. pH, specific gravity, and viscosity), appropriate to the dosage form. Where antimicrobial preservatives are added, an assay with suitable limits should be included. Antimicrobial preservative effectiveness should be determined in order to establish that the product is capable of resisting microbial contamination.
- Any change to the manufacturing process that impacts the safety and efficacy of the ingredients, such as the use of novel technology (e.g. nanotechnology), requires supporting data and will be reviewed outside the labelling standard.

## 10. NON-MEDICINAL INGREDIENTS

Non-medicinal ingredients must be chosen from the current Natural Health Products Ingredients Database (NHPID) and must meet the limitations outlined in that database, the *Food and Drug Regulations*, and/or the *Policy on Herbs Used as Non-Medicinal Ingredients in Nonprescription Drugs for Human Use*, when relevant.

## 11. REFERENCES

1. *Guidance Document: Labelling of Pharmaceutical Drugs for Human Use*. Health Canada, January 10, 2014.
2. *Guidance for Industry: Impurities in Existing Drug Substances and Products*. Health Canada, September 2005.
3. *Guidance to Industry: Product Monograph*. Health Canada, October 2004.
4. *Herbs Used as Non-Medicinal Ingredients in Nonprescription Drugs for Human Use*. Health Canada, September 1995.
5. *Second report of the expert advisory committee on non-prescription cough and cold remedies*. Health and Welfare Canada, April 1989.
6. United States Food and Drug Administration: Cold, Cough, Allergy, Bronchodilator, and Antiasthmatic Drug Products For Over-The-Counter Human Use; Amendment to Final Monograph for OTC Antitussive Drug Products Code of Federal Regulations Part 341, Title 21, Volume 58, No. 201, Revised as of October 20, 1993.  
<http://www.fda.gov/downloads/drugs/developmentapprovalprocess/developmentresources/over-the-counterotcdrugs/statusofotcrulemakings/ucm115148.pdf>
7. United States Food and Drug Administration: Cold, Cough, Allergy, Bronchodilator, and Antiasthmatic Drug Products For Over-The-Counter Human Use; Code of Federal Regulations Part 341, Title 21, Volume 5, Revised as of April 1, 2014  
<http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfcfr/CFRSearch.cfm?fr=341.14>